



MARIJUANA POLICY PROJECT | WWW.MPP.ORG

DEA names MPP enemy #1

SENATE JUDICIARY
DATE: 14
2/11/11
SB154

Dear MPP MEMBER:

The DEA has us in their sights! In a document outlining the latest developments in the War on Marijuana Users (PDF warning), the DEA lists MPP as the first of a number of deceptive organizations, claiming that we only support medical marijuana as one step toward our goal to fully legalize marijuana. Well ... even a stopped clock is right twice a day. MPP is fighting for full legalization, and as our 2011 strategic plan shows, we're winning.

The DEA knows we're a threat, and we need your support to keep the pressure on them!

Throughout the document, they describe accomplishments in the fight to end marijuana prohibition and nearly all of them were initiated, run, and/or funded by MPP, including:

- In 2008, with support from the Michigan Coalition for Compassionate Care, Michigan became the 13th state to approve marijuana for medicinal purposes.
- Massachusetts, backed by the Committee for Sensible Marijuana Policy, replaced criminal penalties for one ounce of marijuana with a civil fine in 2008.
- The elimination of the Barr Amendment enabled the District of Columbia to implement Initiative 59, a ballot initiative that was approved in 1998 to allow for the use of marijuana for medical treatment.

In 2011, MPP is going to continue to fight tooth and nail against marijuana prohibition and the supporters of that prohibition, such as the DEA. **Please, consider a donation today to help us fight this menace and bring an end to marijuana prohibition once and for all!**

Sincerely,



Rob Kampia
Executive Director
Marijuana Policy Project
Washington, D.C.



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2011 Strategic Plan

As you can see in the strategic plan below, this year is an ambitious and bold one for MPP. If you like what you see below, would you please **donate to our work**?

LOBBY STATE LEGISLATURES

- Enact medical-marijuana laws in Delaware, Illinois, Maryland, and New York. (If we don't succeed in some of these states in 2011, the progress we make will bolster our efforts in these states in 2012.)
- Expand Vermont's existing medical-marijuana law by authorizing the sale of medical marijuana through dispensaries.
- Enact marijuana-decriminalization laws in Rhode Island and Vermont.
- Assist our allies in Hawaii, Michigan, Montana, Nevada, and Washington state to protect and expand these five states' existing medical-marijuana laws.
- Implement the new medical-marijuana laws in Arizona and the District of Columbia.
- Assist our allies in Iowa, Massachusetts, New Hampshire, North Carolina, Tennessee, and Wisconsin with building support for medical-marijuana legislation, with the hope of passing bills in some of these states in 2013.

LAUNCH STATEWIDE INITIATIVES FOR THE NOVEMBER 2012 BALLOT

- Canvass our allies in California to devise a consensus initiative to tax and regulate marijuana similarly to alcohol. (The signature drive will take place in 2012.)
- Launch and complete a signature drive in Colorado to tax and regulate marijuana similarly to alcohol.
- Launch and complete signature drives to legalize medical marijuana in Idaho and North Dakota.
- Launch signature drives to legalize medical marijuana in Arkansas, Missouri, and Ohio. (All three signature drives wouldn't be completed until mid-2012.)

LOBBY THE FEDERAL GOVERNMENT

- Build support for the first-ever bill to de-federalize all marijuana laws. This legislation, which is MPP's model bill on the federal level, would allow states to determine their own marijuana laws without federal interference.
- Work with the U.S. Treasury Department and Congress to (1) reduce the tax burden on businesses that are engaged in marijuana commerce that's legal under state law, and (2) clarify that banks will suffer no federal interference or penalties for allowing marijuana-related businesses to open bank accounts.
- Defend the new, local medical-marijuana law in D.C. from being overturned in Congress.
- Achieve a record-high vote on the floor of the U.S. House of Representatives for an amendment to prevent the U.S. Justice Department (which includes the DEA) from spending any money to interfere with state-level medical marijuana laws. (The record, which was in the summer of 2007, comprised 165 votes; between 210 and 218 votes are necessary for passage, depending on how many members of Congress are present for the vote.)

EDUCATE THE PUBLIC

- Continue serving as the premier source of information on marijuana-related issues for the news media.
- Build grassroots support through digital media, including MPP's blog, MPP's biweekly e-newsletter and video, and MPP's presence on Facebook and Twitter.
- Work with MPP's VIP advisory board and other celebrities to get our message into the news.

Note: Parts of this plan may change from time to time as the year progresses.

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Medical Marijuana: Problems in Montana

June 12, 2010 Medical Issues, Politics 2 Comments

With the number of medical marijuana patients expanding dramatically in the Big Sky State, with storefront operations springing up around the state, and with at least one group of medical marijuana advocates/entrepreneurs touring the state in a medical marijuana caravan complete with pot smoke-filled vans and doctors issuing instant recommendations via web cam, opposition is increasing to the way Montana's medical marijuana law is playing out.

In 2004, 62% of Montana voters approved a medical marijuana ballot initiative. The number of registered patients and caregivers remained relatively low until last year, when the Obama administration announced that it would not prosecute medical marijuana users and providers in states where it is legal. At the beginning of last year, the number of registered medical marijuana cardholders was about 3,000. Now it is closing in on 15,000. And alongside the increase in registered patients has been a boom in "dispensaries," or caregiver storefront operations.

While growing concern is evident across the state, it has burned red hot in Billings, a city of about 100,000 people on I-90 in southeastern Montana, where Western conservatism is strong. There, things have turned ugly, with fire bomb attacks on two medical marijuana businesses a month ago as the city council approved a moratorium on new medical marijuana business licenses. Accompanying those attacks was graffiti painted across windows: "Not in our town," it said.

"That fire bombing was just terrorism," said Mike Meno, communications director for the Marijuana Policy Project, which bankrolled the 2004 initiative. "There is no other word for it. Local activists are telling us that people opposed to medical marijuana think it is something you can still dispute, that it's not even legal. This kind of thing is leading both sides to sort of step back and try to pass some strong regulations so people understand these are law-abiding operations."

And just last week, a group calling itself Safe Communities, Safe Kids emerged in a controversial fashion as children coming home from the last day of school in some Billings schools carried with them flyers containing its anti-medical marijuana message — although not its name. The school board said it shouldn't have happened.

Now, Safe Communities, Safe Kids is engaged in a quixotic quest to place an initiative to repeal the Montana Medical Marijuana Act on the November ballot. Success is extremely unlikely — the group now has one week to collect 24,000 signatures — but the effort highlights the deep antipathy developing toward medical marijuana in various quarters of the state.

The legislature is one of those quarters, and lawmakers are busily drafting a variety of measures aimed at reining in what they view as a medical marijuana program out of control. Yesterday, Gov. Bryan Schweitzer (D) told reporters he agreed that the program needed "a legislative fix" and that he was open to working with legislators in the new session later this year.

Mark Higgins operates Montannabis Inc. and Billings Medical Marijuana, which he is careful to point out is not a dispensary, although it serves more than 200 patients, making it likely the largest caregiver in Billings. "Dispensaries are illegal under Montana law, so we are more of a private club or storefront," he explained. "We can only sell to people who designate us as their caregivers and have our name on the back of their registration card."

"It's gotten pretty insane," Higgins said of the fire bombings, but he didn't attribute them to especially nefarious forces. "I saw video of it; it was young kids with long, black hair. Kids don't think; they push it to extremes and don't think about the consequences."

Higgins is the only caregiver sitting on the city council's ad hoc committee on medical marijuana, and he ran for city council last year after the council ignored his efforts to get zoning requirements for medical marijuana storefronts. Things were getting out of hand, he said.

"The reason for the fire bombings and the parents and the initiative is that some people put marijuana storefronts close to schools, I mean really close," he said. "Who are these people trying to attract? Why would they go to locations like that? That upset a lot of people."

While the location and brazenness of some Billings operations may have inflamed what Higgins called "the West side Christian women," pushing the limits of what the law allows has caused concern and anger statewide. The above-mentioned "caravan" in particular has gotten under people's skin.

"The biggest thing is that for about a year now, a group that calls itself the Montana Caregivers Network has been going around the state holding clinics in different towns in which they have gotten physicians' recommendations for as many as a thousand patients in a single day," said Tom Daubert, who has the point man for the successful 2004 medical marijuana initiative. "They're doing it with physicians on web cams in other states, advertising no medical records necessary. They are very visible, and the guy running the group smokes pot openly. They had dozens of caregivers with big buckets of weed, and they sometimes sell to people who aren't registered. It's hellacious, it's irresponsible, and it's ridiculously stupid politically. It has incited a lot of the backlash."

Drug War Chronicle attempted to contact the Montana Caregivers Network, but the phone number listed on its web site is not a working number and the group has yet to respond to email inquiries.

"There are also a handful of folks who have created dispensaries that are similarly ridiculous in image," Daubert continued. "There are people with no business experience, sometimes with non-drug felony records opening dispensaries near schools, putting flowering plants on the porch, and just generally pushing the margins. And just as pseudo-activist ganja-preneurial craziness has taken on a life of its own, so has the backlash."

"The law needs to be fixed," said Daubert. "Even the folks who advocated for it and helped write it, we're in agreement with law enforcement on what needs to be done."

While Daubert agreed with the governor, law enforcement, and members of the legislature on the need for a legislative fix, Higgins didn't. While there is a need to suitably regulate medical marijuana storefronts, that should be a municipal issue, said Higgins, arguing that the Montana Medical Marijuana Act is working. "I think our system is fine," he said. "It's not broken and doesn't need to be fixed. All you have to do is follow the letter of the law. That's what I do."

But not everyone follows his example, he said. "There are people more willing to operate in grey areas, and there are a lot of caregiver to caregiver transfers and people who grow as wholesalers. That's not legal unless all those storefronts are their patients," Higgins explained. "The only people we can buy from are our patients. If I have a patient growing his own six plants, he can only possess one ounce of dried usable medicine, so as soon as he harvests, he's over the limit. As his caregiver, I can buy an ounce back from him. That's what we do."

A legislative interim committee is in the process of discovering how much consensus there is for legislation on the issue, Daubert said. A full Health Committee meeting is set for June 28 to discuss various proposals, and if there is consensus, committee staff could spend the summer drafting a bill for the committee to review in the fall.

For Daubert, Colorado is a model for how to regulate medical marijuana. "Why not do what Colorado has just done?" he asked. "At a minimum, I see two main thrusts: One would be tightening up the doctor recommendations to require a physical exam and diagnosis and/or a review of medical records. The doctor will have to be physically present in Montana. And it's likely there will be language prohibiting any kind of financial connection between doctors and caregivers," he said.

"The other thrust will be toward much more oversight and record-keeping and auditing and inspection of licensed products," Daubert said. "I'm advocating for recordkeeping that documents a closed-loop system, so we can document there is no diversion rather than arguing about it. Thanks to people being crazy and doing things like smoking openly, there is this mythology that there is a lot of diversion going on. This would address that."

If the legislature is going to act, said Higgins, there are some issues of patient-friendliness it should address. "If I wanted to expand my business and service the whole state, there is no way I could physically do that, so I would have to hire couriers," explained. "But there is nothing in Montana law that says that's legal. Also, they need to clarify on edibles. I don't provide them to my patients because it's a grey area," he said. "But we do give them recipes."

But from the look of it, helping the medical marijuana business thrive doesn't look to be high on lawmakers' agenda. The medical marijuana community is going to have to organize and fight to protect its interests, and if it can't find a way to police itself, lawmakers are going to be only too happy to take on the task.

"It's a shame," said Daubert. "We've been working on a careful strategy to use medical to get toward legalization. It was working until medical blew up in our faces."

Read more: <http://www.darkgovernment.com/news/medical-marijuana-problems-in-montana/#ixzz1DcJX6WV6>